## JUL 1 2002

### 510(k) Summary of Safety and Effectiveness

Trade Name LeVeen<sup>TM</sup> Reflect<sup>TM</sup> Monopolar/Bipolar Needle Electrode

Common/Classification

Name

Classification

Electrosurgical Electrode

Class II

Summary of Substantial

Equivalence

The LeVeen<sup>™</sup> Reflect<sup>™</sup> Monopolar/Bipolar Needle Electrode is substantially equivalent to the previously cleared LeVeen<sup>™</sup> Needle Electrode and the preamendment Greenwald Bipolar Needle Electrodes.

Device Description The device consists of two, preshaped, multi-armed

electrode arrays that are contained within an insulated delivery cannula. The arrays are attached to a handle mechanism that allows the arrays to be individually deployed out from the cannula into the targeted tissue. The device is connected to a RadioTherapeutics RF generator so that RF energy passes between the two arrays and heats the tissue surrounding the arrays and heats the tissue in

between the arrays.

Intended Use The LeVeen<sup>TM</sup> Reflect<sup>TM</sup> Monopolar/Bipolar Needle

Electrode is intended to be used in conjunction with a RadioTherapeutics Corporation radiofrequency (RF) generator for the thermal coagulation necrosis of soft tissue, including partial or complete ablation of

nonresectable liver lesions.

**RadioTherapeutics Corporation** 

1308 Borregas Avenue, Sunnyvale, CA 94089 (408) 745-3200 • Fax (408) 745-9848 April 18, 2001



Food and Drug Administration 9200 Corporate Boulevard Rockville MD 20850

## JUL 1 2002

Jodi Lynn Greenizen Regulatory Affairs Project Manager Boston Scientific Corporation, Medi-Tech NAMIC Technology Center 10 Glens Falls Technical Park, Dix Avenue Glens Falls, New York 12801

Re: K011220

Trade Name: Leveen™ Reflect™ Monopolar/Bipolar Needle Electrode

Regulation Number: 878.4400

Regulation Name: Electrosurgical cutting and coagulation device and accessories

Regulatory Class: II Product Code: GEI Dated: April 24, 2002 Received: April 29, 2002

#### Dear Ms. Greenizen:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and we have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the Federal Register.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

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This letter will allow you to begin marketing your device as described in your Section 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801 and additionally 21 CFR Part 809.10 for <u>in vitro</u> diagnostic devices), please contact the Office of Compliance at (301) 594-4659. Additionally, for questions on the promotion and advertising of your device, please contact the Office of Compliance at (301) 594-4639. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR Part 807.97). Other general information on your responsibilities under the Act may be obtained from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 443-6597 or at its Internet address http://www.fda.gov/cdrh/dsma/dsmamain.html

Sincerely yours,

Celia M. Witten, Ph.D., M.D.

Director

Division of General, Restorative and Neurological Devices Office of Device Evaluation Center for Devices and Radiological Health

**Enclosure** 

11011000

510(k) Number (if known): <u>Unknown</u>

Device Name: The LeVeen<sup>TM</sup> Reflect<sup>TM</sup> Monopolar/Bipolar Needle Electrode

Indications for Use: The LeVeen<sup>TM</sup> Reflect<sup>TM</sup> Monopolar/Bipolar Needle Electrode is intended to be used in conjunction with a RadioTherapeutics Corporation radiofrequency (RF) generator for the thermal coagulation necrosis of soft tissue, including partial or complete ablation of nonresectable liver lesions.

(PLEASE DO NOT WRITE BELOW THIS LINE – CONTINUE ON ANOTHER PAGE IF NEEDED)

Concurrence of CDRH, Office of Device Evaluation (ODE)

(Division Sign-Off)

Division of General, Restorative and Neurological Devices

510(k) Number <u>KOLL</u>270

Prescription Use \_\_\_\_\_

OR

Over-The-Counter Use \_\_\_\_\_

(Optional Format 1-2-96)